



Federal Emergency Management Agency

Washington, D.C. 20472

March 30, 2001

Dear Assistance to Firefighters Grant Applicant:

Thank you for your interest in the Federal Emergency Management Agency's (FEMA) new Assistance to Firefighters Grant Program. Enclosed is an application package that consists of:

- 1) Program Guidance describing the eligible categories.
- 2) Grant application forms and instructions to complete.
- 3) General and category specific questions to answer.
- 4) Sample set of FEMA grant award articles for your information.
- 5) A checklist of the items that must be completed in order for you to submit an eligible application.

As you may know, in its 2001 appropriation (Public Law 106-398), Congress gave FEMA the authority to carry out an initiative to provide assistance to firefighters. This assistance will be awarded directly to local fire departments on a competitive basis. The evaluation of the applications will be based on a department's demonstrated financial need for, and benefit to be derived from, the grant funds.

Each applicant will be required to answer a series of general questions, which are included in the application package. One of the questions involves the various categories of assistance available under this grant program, specifically, "What categories of assistance are you applying for with this application and how much funding are you seeking?" You may apply for ***no more than two*** of the six eligible categories (i.e., training, wellness/fitness, vehicles, firefighting equipment, personal protective equipment, or fire prevention programs).

Once you've established which categories of assistance you wish to apply for, you must answer the category-specific questions that are also included in this application package. In addition to the category-specific questions, you must provide additional supporting justification in the form of a program narrative and a budget for each category of assistance you select. The FEMA Form 20-20, listed above, will accommodate both budgets, if necessary. (There is a \$750,000 limit in Federal funds that may be awarded this year to any applicant.) The program narrative should include a project description (including an explanation of any major budgetary expenses), a statement or information that demonstrates your department's financial need for the assistance, and a brief analysis

of benefits to be derived from the funds. This narrative should be double spaced and not exceed five (5) pages.

Applicants may seek clarification in formulating their cost-benefit statements or any other justifications required by this program by contacting our Grant Program Technical Assistance Center at 866-274-0960; faxing your request to us at 866-274-0942; or emailing your request to USFAGRANTS@fema.gov. We will also place useful information concerning application requirements in the FAQs and Program Description on the FEMA/USFA websites.

When you send us your application, please be sure that your cover letter or transmittal includes a fax number (including area code, if applicable) and/or your email address (if applicable) in the event we need to contact you concerning your application. Your completed application must include a cover letter, on department letterhead, and consist of the original and two complete copies of the original. Your application should include all of the following:

- 1) A ***signed*** Standard Form 424, Request for Federal Assistance, which includes your Employer Identification Number.
- 2) FEMA Form 20-20, Budget Information – Nonconstruction Programs.
- 3) Program Narrative and Responses to FEMA questions for each category. The program narrative must be double spaced.
- 4) The signed FEMA Form 20-16 (Summary Sheet for Assurances and Certifications) along with the 20-16A and the 20-16C; and
- 5) Standard Form LLL, Disclosure of Lobbying Activities, if applicable.

You are advised that applications that are deficient with respect to any of these elements will not be processed. You are also advised that neither your application nor the forms that comprise the application package commits the Government to enter into a grant or to pay any cost incurred in the preparation of an application.

Your completed application must be received on or before close of business May 2, 2001. **No applications will be accepted if received after close of business on May 2nd. Close of business is 5:00pm, EDT.** Send your applications to the following address:

Federal Emergency Management Agency
USFA Grant Program Technical Assistance Center
16825 South Seton Avenue
Emmitsburg, MD 21727-8998

Note: Please include all nine digits of the zip code! You should include a nine digit zip code in any field requiring a zip code.

If you have any questions or need further information, please feel free to call our Grant Program Technical Assistance Center at 866-274-0960 or email at USFAGRANTS@fema.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "RM Goodman". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Richard Goodman, Director
Grants and Acquisitions Support Division

Enclosures

Federal Emergency Management Agency Assistance to Firefighters Grant Program Application Checklist

Fire Department: _____

To Complete the Application, Have You:	
Completed the Standard Form-424, Request for Federal Assistance (All fields identified in the application's instructions)?	
Signed the Standard Form-424?	
Completed FEMA Form 20-20, Budget Information – Non-construction Program, for each category applied for, one category per column?	
Signed FEMA Form 20-20 (Budget Information)?	
Completed and signed FEMA Form 20-16, Summary Sheet for Assurances and Certifications?	
Completed and signed Standard Form LLL, Disclosure of Lobbying Activities if applicable?	
Completed the General Questions for all applicants?	
Completed the Category Specific Questions for all categories for which applying (no more than 2)?	
Completed a project narrative that gives detailed information for all categories for which applying? (Five page limit for each narrative.)	
Limited your application to two categories?	
Sent an original and two copies of the completed application package?	
Mailed the application package for delivery to FEMA by the May 2, 2001 Deadline?	

NO LATE OR INCOMPLETE APPLICATIONS WILL BE REVIEWED.

Program Guidance

Each application will consist of the answers to general questions and category specific questions, as well as a program narrative. The narrative statement identifies the proposed measure to be funded, articulates the financial need of the fire department, and details the benefits to be derived from the expenditure of grant funding.

We will rank all eligible applications based on the answers to the category specific questions. We will then further evaluate the highest ranked applications using expert panelists. These experts will again use the answers to the questions along with the project narratives to ascertain the financial needs of the applicant and the benefits that would result from the grant award. In short, the narratives will be used to validate the answers to the category specific questions. Discrepancies between the narratives and the answers to the questions may result in a lower evaluation.

Keep in mind that we will use your answers to the category specific questions for the initial assessment. Your answers to these questions are the primary basis upon which we will determine whether your application warrants further evaluation. Applicants whose answers best reflect our established priorities (as outlined below and in the Federal Register Notice), will have a significantly better chance of reaching the second level of review than those applicants whose answers do not reflect our priorities.

Specific rating criteria and priorities for each of the grant categories are provided below under the descriptions of this year's eligible categories. The rating criteria, in conjunction with the program description, will provide you with an understanding of what information we are seeking with respect to the cost effectiveness of the proposed projects and your department's financial need.

Training: FEMA may make grants for the purpose of training firefighting personnel in fire-fighting, emergency response, supervision and safety, arson prevention and detection, handling of hazardous materials, or training firefighting personnel to provide training in any of these areas. Eligible uses of training funds include but are not limited to purchase of training curricula, training equipment and props, training services, or attendance at formal training forums.

We believe that more benefit is derived from the direct delivery of training than from the purchase of training materials and equipment. Therefore, applications focused on direct delivery of training, including train-the-trainer initiatives, will receive a higher competitive rating. We also believe that funding of basic firefighting training (i.e., training in basic firefighting duties or operating fire apparatus) has greater cost benefit than funding of officer or safety officer training, which in turn has a higher rating than specialized training. We will also accord higher rating to applicants seeking to implement statutorily required training rather than non-mandatory or strictly voluntary training. Finally, we will rate more highly those proposed programs that benefit the highest percentage of targeted personnel within a fire department or those proposed programs that will be open to other departments in their region.

Wellness and Fitness Programs: FEMA may make grants for the purpose of establishing and/or equipping wellness and fitness programs for firefighting personnel, including the procurement of medical services to ensure that the firefighting personnel are physically able to carry out their duties (purchase of medical equipment is not eligible under this category).

We believe that in order to have an effective wellness/fitness program, fire departments must offer both an entry physical examination and an immunization program. Accordingly, applicants for grants in this category must currently offer both benefits, or must propose to initiate both a physical examination and an immunization program with these grant funds in order to receive additional funding for either of these purposes. We believe the greatest benefit will be realized by supporting new wellness and fitness programs, and therefore, we will accord higher competitive ratings to those applicants lacking wellness/fitness programs over those applicants that already possess a wellness/fitness program. Finally, since participation is critical to achieving any benefits from a wellness or fitness program, we will give higher competitive rating to departments whose wellness and fitness programs mandate participation as well as programs that provide incentives for participation.

Vehicles: FEMA may make grants for the purpose of acquiring additional firefighting vehicles, including fire apparatus, or refurbishing apparatus currently owned.

We believe that more benefit will be realized by funding fire departments that own few or no firefighting apparatus than by providing funding to a department with numerous vehicles. Therefore, we will give a higher competitive rating in the apparatus category to fire departments that own few or no firefighting vehicles. We will also give higher competitive rating to departments that have not recently purchased a new firefighting vehicle, and departments that wish to replace an old, high-mileage vehicle or a vehicle that has sustained a high number of responses. We do not believe that there is sufficient cost benefit from expenditures for vehicles with ladder or aerial apparatus and will not accord positive competitive standing to applications proposing such purchases.

Firefighting Equipment: FEMA may make grants for the purpose of acquiring additional firefighting equipment, including equipment for individual communications and monitoring (integrated communications systems are not eligible).

We believe that this grant program will achieve the greatest benefits if we provide funds to fire departments purchasing basic firefighting equipment (never owned prior to grant) to bring their departments up to the applicable minimum (i.e., as required by statute, regulation, or professional firefighting guidance), rather than to the department that is replacing equipment or enhancing capabilities. Because of the obvious benefits, we will also give higher competitive rating to departments that are mainly purchasing firefighting equipment with design features intended to protect the safety of the firefighters.

Personal Protective Equipment: FEMA may make grants for the purpose of acquiring personal protective equipment required for firefighting personnel by the Occupational Safety

and Health Administration, and other personal protective equipment for firefighting personnel.

One of the stated purposes of this grant program is to protect the health and safety of firefighters. In order to achieve this goal and maximize the benefit to the firefighting community, we believe that we must fund those applicants needing to provide personal protective equipment (PPE) to a high percentage of their personnel. Accordingly, we will give a high competitive rating in this category to fire departments in which a large percentage of active firefighting staff do not have any personal protective equipment and to departments that wish to purchase enough PPE to equip 100 percent of their active firefighting staff. We will also give a higher competitive rating to departments that are purchasing the equipment for the first time as opposed to departments replacing obsolete or substandard equipment (e.g., equipment that does not meet current NFPA and OSHA standards), or purchasing equipment for a new mission.

Fire prevention programs: FEMA may make grants for the purpose of establishing or enhancing a fire prevention program.

We believe that the public as a whole will receive greatest benefit from fire prevention funds channeled to fire departments that currently do not have a prevention program. Also, we believe the public will benefit greatly from long-term fire prevention programs as opposed to limited efforts. Therefore, we will give a higher competitive rating to programs that will be self-sustaining after the grant period. Because of the benefits to be attained, we will give a higher competitive rating to programs that target one or more of USFA's identified high-risk populations (i.e., children under fourteen years of age, seniors over sixty-five and firefighters), and programs whose impact is/will be periodically evaluated. We believe public education programs and community-based, participatory programs that purchase and install residential and public detection and suppression systems achieve greater benefits than do programs that develop and enforce codes and standards. Public information materials and presentation aids and equipment achieve the least benefit, therefore, these types of activities will be accorded the lowest competitive rating.

Instructions for Filling Out Grant Application Forms for the Assistance to Firefighters Grant Program

PLEASE NOTE: THESE INSTRUCTIONS TAKE PRECEDENCE OVER THOSE CONTAINED ON THE BACKS OF THE INDIVIDUAL FORMS. WHERE THERE ARE DIFFERENCES, PLEASE FOLLOW THE INSTRUCTIONS LISTED HERE.

Standard Form 424, Request for Application

- Block 1 – Ignore, appropriate response has been pre-determined.
- Block 2 – Enter the date applicant submits application to FEMA.
Applicant Identifier – Leave blank.
- Block 3 – Leave blank.
- Block 4 – Leave blank.
- Block 5 – Enter your fire department's name and full address.
- Block 6 – Enter your tax identification number.
- Block 7 – Check N "Other" and enter one of the following: Fire Department, Community Organization, Safety Organization or Hospital.
- Block 8 – Ignore, appropriate response has been pre-determined.
- Block 9 – Ignore, appropriate response has been pre-determined.
- Block 10 – Ignore, appropriate response has been pre-determined.
- Block 11 – Leave blank.
- Block 12 – List the cities and/or counties that will benefit from funding.
- Block 13 – Leave blank.
- Block 14a – Enter your congressional district.
- Block 14b – Enter the congressional district that will benefit from the funding.
- Block 15a – Enter the amount of Federal funding you are requesting.
- Block 15b – Enter the amount of funding to be provided by you. If your department protects a population of over 50,000, you are responsible for providing 30 percent of the project costs. If your department protects a population of 50,000 or less you are responsible for providing 10 percent of the project costs.
- Blocks 15c, d, and e – Enter the amount of funding to be provided, if any, by these entities.
- Block 15f – Leave blank.
- Block 16 – Ignore, appropriate response has been pre-determined.
- Block 17 – Check appropriate response.
- Block 18 – Complete information, sign and date form.

FEMA Form 20-20, Budget Information – Non-construction Programs

- Block 1 – Ignore, appropriate response has been pre-determined.
- Block 2 – Leave blank.
- Block 3 – Enter name and complete address of applicant.
- Block 4 – Enter the tax identification number (should be the same number as that from Block 6 of the SF 424).
- Blocks 5 and 6 – Leave blank.
- Block 7 – Ignore, appropriate response has been pre-determined.
- Block 8 – If your department protects a population of over 50,000, enter 70/30.
If your department protects a population of 50,000 or less enter 90/10.
- Block 9 – Insert the categories for which you are applying; one per column.
- Block 10a thru g – Itemize your budget in these applicable cost categories.
- Block 10h – Enter any administrative costs that you plan to charge to this grant.
- Block 10i thru k – Itemize your budget in these applicable cost categories.
- Block 10l – Enter amount of Federal funding requested.
- Blocks 10m thru p – Enter appropriate amounts (should be same information as that contained in Blocks 15b, c, d, and/or e from the SF 424).
- Block 10q – Enter totals of Block 10l-p.
- Block 10r – Leave blank.
- Block 10s– This block must be completed, if you are claiming indirect cost in line 10j. If you claim indirect costs, you must also submit a copy of your approved indirect cost rate document along with your application if you are planning to claim indirect costs.
- Blocks 11, 12, 13, and Date Report Submitted – Self-explanatory, but critical.
These blocks must be filled out and signed by your authorizing official.

FEMA Form 20-16, Summary Sheet for Assurances and Certifications

- First Block – Enter 2001.
- Second block – Enter your organization's name.
- Applicant must place a check in the block corresponding to Part I, Part III, and Part IV. (The significance of the check mark is explained on Forms 20-16A, 20-16B, and 20-16C.)
- The document must then be signed and dated by your department's authorizing Official in the provided spaces.

Standard Form LLL, Disclosure of Lobbying Activities

You do not have to fill out this form if you or your community have not paid, or if you or your community are not going to pay any person for influencing or attempting to influence a Federal official or member of Congress in connection with this solicitation (i.e., your application).

If you or your community have paid someone or will pay someone who has influenced or attempted to influence a Federal official or a member of Congress in connection with this solicitation (i.e., your application), please follow the instructions listed below:

Block 1 - Enter b.

Block 2 - Enter b.

Block 3 - Enter a.

Block 4 - Check "Prime" and add name and address.

Block 5 - Leave Blank

Block 6 - Enter "FEMA"

Block 7 - Enter 83.554.

Blocks 8 & 9 - Leave blank.

Blocks 10a and 10b - Enter name of lobbyist.

Block 11 - Sign, print name, title, telephone number and date.

APPLICATION FOR FEDERAL ASSISTANCE

OMB Approval No. 0348-0043

1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction		2. DATE SUBMITTED 		Applicant Identifier	
Preapplication <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		3. DATE RECEIVED BY STATE 		State Application Identifier	
		4. DATE RECEIVED BY FEDERAL AGENCY 		Federal Identifier	

5. APPLICANT INFORMATION

Legal Name:	Organizational Unit:
Address (give city, county, State, and zip code):	Name and telephone number of person to be contacted on matters involving this application (give area code)

6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; margin-bottom: 5px;"></div>	7. TYPE OF APPLICANT: (enter appropriate letter in box) <div style="text-align: right; margin-bottom: 10px;"> <div style="border: 1px solid black; padding: 2px 5px; display: inline-block;">N</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> A. State B. County C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District </div> <div style="width: 48%;"> H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify) _____ </div> </div>
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8. TYPE OF APPLICATION:

☒ New
 ☐ Continuation
 ☐ Revision

 If Revision, enter appropriate letter(s) in box(es)

A. Increase Award
 D. Decrease Duration

B. Decrease Award
 Other (specify):

C. Increase Duration

9. NAME OF FEDERAL AGENCY:

Federal Emergency Management Agency

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:

8

3

-

5

5

4

TITLE: Firefighters Assistance Grants

11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.):

13. PROPOSED PROJECT:	14. CONGRESSIONAL DISTRICTS OF:
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Start Date	Ending Date	a. Applicant	b. Project
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15. ESTIMATED FUNDING: <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 15%;">a. Federal</td> <td style="width: 10%;">\$</td> <td style="width: 75%; text-align: right;">.00</td> </tr> <tr> <td>b. Applicant</td> <td>\$</td> <td style="text-align: right;">.00</td> </tr> <tr> <td>c. State</td> <td>\$</td> <td style="text-align: right;">.00</td> </tr> <tr> <td>d. Local</td> <td>\$</td> <td style="text-align: right;">.00</td> </tr> <tr> <td>e. Other</td> <td>\$</td> <td style="text-align: right;">.00</td> </tr> <tr> <td>f. Program Income</td> <td>\$</td> <td style="text-align: right;">.00</td> </tr> <tr> <td>g. TOTAL</td> <td>\$</td> <td style="text-align: right;">.00</td> </tr> </table>	a. Federal	\$.00	b. Applicant	\$.00	c. State	\$.00	d. Local	\$.00	e. Other	\$.00	f. Program Income	\$.00	g. TOTAL	\$.00	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? <div style="margin-top: 10px;"> a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE: _____ </div> <div style="margin-top: 10px;"> b. No. <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW </div>
a. Federal	\$.00																				
b. Applicant	\$.00																				
c. State	\$.00																				
d. Local	\$.00																				
e. Other	\$.00																				
f. Program Income	\$.00																				
g. TOTAL	\$.00																				

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?

☐ Yes If "Yes," attach an explanation.
 ☐ No

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. Type Name of Authorized Representative	b. Title	c. Telephone Number
d. Signature of Authorized Representative		e. Date Signed

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

- | Item: | Entry: | Item: | Entry: |
|-------|---|-------|--|
| 1. | Self-explanatory. | 12. | List only the largest political entities affected (e.g., State, counties, cities). |
| 2. | Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable). | 13. | Self-explanatory. |
| 3. | State use only (if applicable). | 14. | List the applicant's Congressional District and any District(s) affected by the program or project. |
| 4. | If this application is to continue or revise an existing award, enter present Federal identifier number. If for a new project, leave blank. | 15. | Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate <u>only</u> the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15. |
| 5. | Legal name of applicant, name of primary organizational unit which will undertake the assistance activity, complete address of the applicant, and name and telephone number of the person to contact on matters related to this application. | 16. | Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. |
| 6. | Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service. | 17. | This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes. |
| 7. | Enter the appropriate letter in the space provided. | 18. | To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.) |
| 8. | Check appropriate box and enter appropriate letter(s) in the space(s) provided:

-- "New" means a new assistance award.

-- "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date.

-- "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. | | |
| 9. | Name of Federal agency from which assistance is being requested with this application. | | |
| 10. | Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested. | | |
| 11. | Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project. | | |

FEDERAL EMERGENCY MANAGEMENT AGENCY BUDGET INFORMATION--NONCONSTRUCTION PROGRAMS				See reverse for Paperwork Burden Disclosure Notice		Page of pages		OMB No. 3067-0206 Expires February 29, 2004	
1. PROGRAM AGENCY AND ORGANIZATION ELEMENT TO WHICH REPORT IS SUBMITTED		2. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED		3. RECIPIENT ORGANIZATION (Name and complete address, including zip code)					
4. EMPLOYER IDENTIFICATION		5. RECIPIENT ACCOUNT NUMBER OR I.D. NO.		6. BUDGET PERIOD (Month, Day, Year) Beginning Date: Ending Date:		7. Mark "X" in Appropriate Box <input type="checkbox"/> New Budget <input type="checkbox"/> Revised Budget. Enter Grant Number in Box 2 above Date of Budget Revision:			
8. FEDERAL RATE SHARING (%) →		(%)	(%)	(%)	(%)	Total			
9. PROGRAM ACRONYM →									
CFDA NUMBER →									
10. Object Class	a. Personnel								
	b. Fringe Benefits								
	c. Travel								
	d. Equipment								
	e. Supplies								
	f. Contractual								
	g. Construction								
	h. Other								
	i. Total Direct Charges (10a to 10h)								
	j. Indirect Charges								
	k. Total (Sum of 10i & 10j)								
Source	l. Federal Share								
	Non-Federal Resources:								
	m. Applicant								
	n. State								
	o. Local								
	p. Other Sources								
q. Total (Sum of 10l to 10p)									
Income	r. Program Income								
Indirect Cost	s. Detail on Indirect Cost								
	Type of Rate (mark "X" in one box) <input type="checkbox"/> Provisional-Final <input type="checkbox"/> Predetermined <input type="checkbox"/> Fixed with Carry-Forward Rate: % Total Amount of Indirect Cost: _____ Base: _____								
11. Signature of Authorizing Official		12. Name and Title (Type or print)		13. Telephone Number (Area code, Number and Extension)			Date Report Submitted		

Paperwork Burden Disclosure Notice

“Public reporting burden for this form is estimated to average 9.7 hours per response. Burden means the time, effort and financial resources expended by persons to generate, maintain, retain, disclose, or to provide information to us. You may send comments regarding the burden estimate or any aspect of the form, including suggestions for reducing the burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (3067-0206). You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Please do not send your completed form to the above address.”

INSTRUCTIONS

1. Enter FEMA.
2. Enter grant or cooperative agreement identifier.
3. Enter the name of the recipient to receive assistance.
4. Enter the number assigned to the recipient by the Internal Revenue Service. This number should be the same as the number reported in Item 6 of the applicant's Application for Federal Assistance, SF 424.
5. Enter recipient account number or identification number.
6. Enter the beginning and ending dates for the budget period submitted for approval.
7. Mark the appropriate box for budget submission and date of budget revision.
8. Enter Federal rate of sharing percentage.
9. Enter each program acronym and CFDA number in the horizontal columns. Columns are to be used to report by Program.
10. Enter the estimated amounts for:
 - 10a. Personnel costs.
 - 10b. Fringe benefits.
 - 10c. Travel.
 - 10d. Equipment to be purchased. Note: Rented or leased equipment amounts are listed in Other, Item (h).
 - 10e. Expendable supplies.
 - 10f. Contractual costs.
 - 10g. Minor construction or renovation costs.
 - 10h. Rent, reproduction, telephone, rented/leased equipment, janitorial and security services, etc.
 - 10i. Enter the sum of Items 10a through 10h.
 - 10j. Enter amount for the Indirect Charges (applicant must include a copy of the approved indirect cost agreement with the application).
 - 10k. Enter the sum of Items 10i and 10j.
 - 10l. Federal Share. Enter the Federal Share amount.
 - Non-Federal Resources. Enter the non-Federal amounts in items 10m through 10p that are being contributed by:
 - 10m. The Applicant.
 - 10n. The State.
 - 10o. The Local Government.
 - 10p. Sources Other than State or Local Governments.
 - 10q. Enter the sum of 10l through 10p.
 - 10r. Enter the amount of Program Income. Report income expected to be generated during the grant period.
 - 10s. Provide the details on type of rate, the rate or rates that are in effect during the funding period, the amount of base the rate is to be applied and the total amount of indirect costs. If additional space is required to provide an explanation, attach a schedule. Note: Each time a FEMA Form 20-20 is submitted, the applicant is to attach the most recent negotiated Indirect Cost Agreement.
11. The individual's signature who has the responsibility for the submission of the budget data.
12. Type or print the authorizing official's name and title.
13. Telephone Number. Type or print the authorizing official's telephone number.
Date Report Submitted. Enter the date of submission.

FEDERAL EMERGENCY MANAGEMENT AGENCY
SUMMARY SHEET FOR ASSURANCES AND CERTIFICATIONS

O.M.B. No. 3067-0206
Expires February 29, 2004

FOR
FY

CA FOR (Name of Applicant)

This summary sheet includes Assurances and Certifications that must be read, signed, and submitted as a part of the Application for Federal Assistance.

An applicant must check each item that they are certifying to:

- Part I ☐ FEMA Form 20-16A, Assurances-Nonconstruction Programs
- Part II ☐ FEMA Form 20-16B, Assurances-Construction Programs
- Part III ☐ FEMA Form 20-16C, Certifications Regarding Lobbying;
Debarment, Suspension, and Other Responsibility
Matters; and Drug-Free Workplace Requirements
- Part IV ☐ SF LLL, Disclosure of Lobbying Activities (If applicable)

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the identified attached assurances and certifications.

Typed Name of Authorized Representative

Title

Signature of Authorized Representative

Date Signed

NOTE: By signing the certification regarding debarment, suspension, and other responsibility matters for primary covered transaction, the applicant agrees that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by FEMA entering into this transaction.

The applicant further agrees by submitting this application that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the FEMA Regional Office entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions. (Refer to 44 CFR Part 17.)

Paperwork Burden Disclosure Notice

"Public reporting burden for this form is estimated to average 1.7 hours per response. Burden means the time, effort and financial resources expended by persons to generate, maintain, retain, disclose, or to provide information to us. You may send comments regarding the burden estimate or any aspect of the form, including suggestions for reducing the burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (3067-0206). You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Please do not send your completed form to the above address.

FEDERAL EMERGENCY MANAGEMENT AGENCY
ASSURANCES-NON-CONSTRUCTION PROGRAMS

Note: Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration) 5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290-dd-3 and 290-ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or Federally assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with provisions of the Hatch Act (5 U.S.C. Sections 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. Sections 276a to 276a-7), the Copeland Act (40 U.S.C. Section 276c and 18 U.S.C. Sections 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. Sections 327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. Section 1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. Section 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

19. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (29 U.S.C. 201), as they apply to employees of institutions of higher education, hospitals, and other non-profit organizations.

FEDERAL EMERGENCY MANAGEMENT AGENCY
CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND
OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 28 CFR Part 17, "Government-wide Debarment and suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Federal Emergency Management Agency (FEMA) determines to award the covered transaction, grant, or cooperative agreement.


1. LOBBYING

A. As required by section 1352, Title 31 of the U.S. Code, and implemented at 44 CFR Part 18, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 44 CFR Part 18, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or an employee of Congress, or employee of a member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontract(s) and that all subrecipients shall certify and disclose accordingly.

 Standard Form LLL, "Disclosure of Lobbying Activities" attached.
(This form must be attached to certification if nonappropriated funds are to be used to influence activities.)

2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 44 CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510-A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 44 CFR Part 17, Subpart F, for grantees, as defined at 44 CFR Part 17, Sections 17.615 and 17.620:

A. The applicant certifies that it will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug free awareness program to inform employees about:

- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

(1) Abide by the terms of the statement; and

(2) Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

(e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable FEMA awarding office, i.e., regional office or FEMA office.

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency.

(g) Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

8. the grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, City, County, State, Zip code)

Check ☐ if there are workplaces on file that are not identified here.

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for FEMA funding. States and State agencies may elect to use a Statewide certification.

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure)

Approved by OMB

0348-0046

1. Type of Federal Action: <input type="checkbox"/> a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance		2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application b. initial award c. post-award		3. Report Type: <input type="checkbox"/> a. initial filing b. material change For Material Change Only: year _____ quarter _____ date of last report _____	
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known : Congressional District, if known :			5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known :		
6. Federal Department/Agency:			7. Federal Program Name/Description: CFDA Number, if applicable: _____		
8. Federal Action Number, if known :			9. Award Amount, if known : \$ _____		
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):			b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.			Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____		
Federal Use Only:			Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)		

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

General Questions for All Applicants

Questions, page 1 of 2	For FEMA Use Only
<p>1. Are you a Fire Department or the authorized representative of a fire department? (circle one)</p> <p style="margin-left: 40px;">a) Yes. b) No.</p>	
<p>2. Are you a Federal Fire Department or contracted by the Federal government and solely responsible for suppression of fires on Federal property?</p> <p style="margin-left: 40px;">a) Yes. b) No.</p>	
<p>3. Is your active firefighting staff (circle one):</p> <p style="margin-left: 40px;">a) all paid/career? b) all volunteer or combination volunteer and career?</p>	
<p>4. Is your department located in (circle one):</p> <p style="margin-left: 40px;">a) an urban community (population over 250,000)? b) a suburban community (population between 20,000 and 250,000)? c) a rural community (population under 20,000)?</p>	
<p>5. How many active firefighters are in the operations/- EMS divisions of you department?</p> <p style="margin-left: 40px;">_____ = Number of active firefighters.</p>	

General Questions for All Applicants

Questions, page 2 of 2	For FEMA Use Only
<p>6. What is the permanent resident population of your primary/first-response area or jurisdiction served?</p> <p style="margin-left: 40px;">_____ = Population of response area.</p>	
<p>7. What category (or categories) of assistance are you applying for with this application and how much is the total Federal share of the cost of the project that you are seeking in each category?</p> <p>Category #1: _____ \$</p> <p>Category #2: _____ \$</p>	
<p>8. If the population you protect is 50,000 or less, you are required to provide a non-Federal cost-share equal to 10 percent of the total project cost. If the population you protect is over 50,000, you are required to provide a non-Federal cost-share equal to 30 percent of the total project cost. Are you willing to comply with this requirement? (circle one)</p> <p style="margin-left: 40px;">a) Yes.</p> <p style="margin-left: 40px;">b) No.</p>	
<p>9. It is also a requirement that departments receiving funding under this grant program agree to provide information to the national fire incident reporting system (NFIRS). If you receive an award, do you agree to provide information to this national system? (circle one)</p> <p style="margin-left: 40px;">a) Yes.</p> <p style="margin-left: 40px;">b) No.</p>	

Questions for Fire Prevention Programs

Questions, page 1 of 2	For FEMA Use Only
<p>1. In what areas do you plan on using these fire prevention grant funds (circle the answer where the bulk of the funding will be spent):</p> <ul style="list-style-type: none"> a) Public education programs. b) Purchase and installation of residential/public detection and suppression systems. c) Development/enforcement of codes. d) Public information materials. e) Presentation aids and equipment. f) Other, specify = _____ 	
<p>2. Does your department currently have a fire prevention program or plan? (circle one)</p> <ul style="list-style-type: none"> a) Yes. b) No. 	
<p>3. The grant will (circle one):</p> <ul style="list-style-type: none"> a) Establish a new program. b) Expand an existing program into new areas. c) Augment an existing fire prevention program. 	
<p>4. Will this program establish a multi-organizational partnership with other groups in your community? (circle one)</p> <ul style="list-style-type: none"> a) No. b) Yes, specify = _____ 	

Questions for Fire Prevention Programs

Questions, page 2 of 2	For FEMA Use Only
<p>5. Who is the target audience of the planned program? (circle one)</p> <p style="margin-left: 40px;">a) USFA target:</p> <p style="margin-left: 80px;">>Children under 14</p> <p style="margin-left: 80px;">>Adults over 65</p> <p style="margin-left: 80px;">>Firefighters</p> <p style="margin-left: 40px;">b) Other high risk group (i.e., local target group).</p>	
<p>6. How long will the program be sustained after the grant period? (circle one)</p> <p style="margin-left: 40px;">a) Less than one year.</p> <p style="margin-left: 40px;">b) Two to five years.</p> <p style="margin-left: 40px;">c) More than five years.</p>	
<p>7. Will your department periodically evaluate the program's impact on the community? (circle one)</p> <p style="margin-left: 40px;">a) No.</p> <p style="margin-left: 40px;">b) Yes, specify = _____</p>	

Questions for Firefighting Equipment Category

Questions	For FEMA Use Only
1. What equipment will your department purchase with this grant? (attach a general list)	
2. Generally, the equipment purchased under this grant program (circle one): <ul style="list-style-type: none"> a) Is necessary for basic firefighting capabilities, but has never been owned by this department. b) Will replace old, obsolete, or substandard equipment currently owned by this department. c) Will expand the capabilities of the department into a new mission area. 	
3. Generally, the equipment purchased under this grant program (circle one): <ul style="list-style-type: none"> a) Will bring the department into statutory compliance, specifically: _____ b) Will bring the department into voluntary compliance with a national standard, specifically: _____ c) Has no statutory basis. 	
4. What percentage of the equipment purchased under this grant program will benefit the health and safety of the firefighters and/or community? _____ = Percentage of equipment for safety.	

Questions for Personal Protective Equipment Category

Questions	For FEMA Use Only
<p>1. What percentage of your active firefighting staff has personal protective equipment that meets current NFPA and OSHA standards?</p> <p>_____ = Percentage with PPE.</p>	
<p>2. What percentage of your active firefighting staff will have personal protective equipment that meets current NFPA and OSHA standards if this grant is awarded?</p> <p>_____ = Percentage that will have PPE.</p>	
<p>3. The purpose of this grant is to (circle one):</p> <p style="margin-left: 40px;">a) Equip firefighting staff for the first time.</p> <p style="margin-left: 40px;">b) Replace obsolete or sub-standard equipment.</p> <p style="margin-left: 40px;">c) Equip staff for a new mission.</p>	

Questions for Wellness and Fitness Programs

Questions, page 1 of 2	For FEMA Use Only
<p>1. Do you currently have a wellness/fitness program at your department? (circle one)</p> <p style="margin-left: 40px;">a) Yes.</p> <p style="margin-left: 40px;">b) No.</p>	
<p>2. Does your department currently offer, or will this grant program provide, entry level physical examinations (as per NFPA 1582 standards) and a job related immunization program? (circle one)</p> <p style="margin-left: 40px;">a) Yes.</p> <p style="margin-left: 40px;">b) No.</p>	
<p>3. What does your existing wellness/fitness program provide and what will your program offer during the grant year? (circle all that apply)</p> <p style="margin-left: 40px;">a) Entry physical examinations (NFPA 1582).</p> <p style="margin-left: 40px;">b) Job related immunization program.</p> <p style="margin-left: 40px;">c) Health screening program.</p> <p style="margin-left: 40px;">d) Annual physical examination (NFPA 1582).</p> <p style="margin-left: 40px;">e) Formal fitness and injury prevention program.</p> <p style="margin-left: 40px;">f) Crisis management program.</p> <p style="margin-left: 40px;">g) Employee assistance program.</p> <p style="margin-left: 40px;">h) Incident rehabilitation program.</p> <p style="margin-left: 40px;">i) Injury/illness rehabilitation program.</p> <p style="margin-left: 40px;">j) Other, specify = _____</p>	

Questions for Wellness and Fitness Programs

Questions, page 2 of 2	For FEMA Use Only
4. Will participation in the wellness/fitness programs be mandatory? (circle one) a) Yes. b) No.	
5. Do you, or will you, offer incentives for staff to participate in the wellness/fitness programs? (circle one) a) Yes. b) No.	

Questions for Training Program Category

Questions	For FEMA Use Only
<p>1. List the training activities you plan to conduct with this grant:</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>2. Generally, the training activities outlined above are (circle one):</p> <p>a) Direct-delivery training.</p> <p>b) Off-site training.</p>	
<p>3. Generally, the training you will conduct under this grant can best be catagorized as (circle one):</p> <p>a) Basic training for firefighters (i.e., training in basic firefighting duties or vehicle operations).</p> <p>b) Officer training (either supervisory or safety officer training).</p> <p>c) Specialized training.</p> <p>d) Other, specifiy = _____</p>	
<p>4. Generally, the training provided under this grant (circle one):</p> <p>a) Will fulfill a statutory requirement.</p> <p>b) Will achieve voluntary compliance with a national standard.</p> <p>c) Does not have any statutory basis.</p>	
<p>5. What is the percentage of applicable staff within your department that this program will train?</p> <p>_____ = Percent of trained personnel.</p>	

Questions for Vehicle Category

Questions, page 1 of 2	For FEMA Use Only
<p>1. What type of vehicle will you use the grant funds to purchase (circle one):</p> <ul style="list-style-type: none"> a) Engine (includes Pumpers) b) Tanker c) Heavy Rescue Vehicle d) Brush Truck e) Ambulance f) Aerial Apparatus (includes Ladders) g) Other, specify = _____ 	
<p>2. The purpose for this grant is to (circle one):</p> <ul style="list-style-type: none"> a) Obtain an additional vehicle for firefighting fleet. b) Replace/retire an old firefighting vehicle. c) Refurbish an old firefighting vehicle. d) Purchase a new vehicle to fulfill a new mission. 	
<p>3. How many vehicles of the type or class you are planning to purchase, does your department own?</p> <p style="padding-left: 40px;">_____ = Number of vehicles.</p>	
<p>4. What is the age of your newest first-response vehicle in this class that you currently own?</p> <p style="padding-left: 40px;">_____ = Age of newest vehicle.</p>	

Questions for Vehicle Category

Questions, page 2 of 2	For FEMA Use Only
5. What is the age of the oldest first-response vehicle in this class that you currently own? _____ = Age of oldest vehicle.	
6. What is the mileage on the first-response vehicle you are replacing/refurbishing? _____ = Mileage of vehicle.	
7. What is the average number of annual responses for the first-response vehicle you are replacing/refurbishing? _____ = Average annual responses.	

**Suggested Format for the
Assistance to Firefighters Grants Program's
Project Narrative**

Instructions: Please be sure that your narrative addresses each of the following areas to the best of your ability. Your narrative should be concise, but brief. If you need more room than has been allotted for your answer, please use the back of the suggested form or feel free to attach more sheets. Your narrative may **not** exceed a maximum of **five** pages including this form. The project narrative must be double spaced.

Applicant Name:

Category:

Please describe in full the project that you are requesting to be funded.

Please provide a detailed description of your planned uses of the grant funds for each major budget category as listed on the budget form (SF 20-20).

Please explain why this program would be beneficial to your community and/or to your department.

Please explain why this project cannot be funded solely through local funding.

Please provide any additional relevant information that you would like us to consider when evaluating your application.

SAMPLE AGREEMENT ARTICLES

Federal Emergency Management Agency Agreement Articles Assistance to Firefighters Grant Program

Grantee:

Agreement Number:

Amendment Number:

Table of Contents

Article I	Project Description
Article II	Grantee Concurrence
Article III	Period of Performance
Article IV	Amount Awarded
Article V	Requests for Advances or Reimbursements
Article VI	Budget
Article VII	Financial Reporting
Article VIII	Performance Reports
Article IX	FEMA Officials
Article X	Other Terms and Conditions
Article XI	General Provisions
Article XII	Audit Requirements

Article I – Project Description

The grantee shall perform the work described in the approved grant application's Program Narrative. That narrative is made a part of these grant agreement articles by reference. The purpose of the Assistance to Firefighters Grant Program is to protect the health and safety of the public and firefighting personnel against fire and fire-related hazards. After careful consideration, FEMA has determined that your project, as detailed in your project narrative and budget information, submitted as part of your application (and considered part of this agreement by reference), was consistent with the program's purpose and worthy of award. As such, any deviation from the approved scope of work must have prior written approval from FEMA

Article II – Grantee Concurrence

By expending any funding provided by this grant program, the grantee accepts and agrees to abide by the terms and conditions of the grant as set forth in this document and the documents identified below. All documents submitted as part of the application are made a part of this agreement by reference.

Article III – Period of Performance

The period of performance shall be twelve (12) months from the effective date of this grant:
_____ thru _____.

The grant funds are available to you for obligation only during the period of performance stated above. You are not authorized to incur new obligations after the expiration date shown unless you have requested, and FEMA has approved, a new expiration date. Award expenditures are for the purposes detailed in the approved grant application only. You, the grantee, cannot transfer funds to other agencies or departments without prior written approval from FEMA.

Article IV – Amount Awarded

The amount of the award is detailed on the FEMA Form 40-21 attached to these articles. Following are the budgeted estimates for object classes for this grant:

Personnel	\$
Fringe Benefits	\$
Travel	\$
Equipment	\$
Supplies	\$
Contractual	\$
Construction	\$
Other	\$
Indirect Charges	\$ _____
	\$

Article V – Requests for Advances or Reimbursements

Grant payments under the Assistance to Firefighter Grant Program are made on a reimbursable or an immediate-needs basis. When you need to draw from your grant funds, fill out the attached Request for Advance or Reimbursement (Standard Form 270) and send it to us at the following address:

Federal Emergency Management Agency
Office of Financial Management
Grants & Acquisition Support Division, Room 350
500 C Street, SW
Washington, DC 20472

Payments under this grant program are made via direct deposit; therefore, grantees must fill out the provided Direct Deposit Sign-up Form (Standard Form 1199A) prior to requesting any funds. Failure to provide the requisite information would make it impossible for us to provide you with your grant funds.

Article VI – Budget Changes

Generally, changes in the budget-line items are permitted, as long as the original scope of work is accomplished. The only exception to this provision is for grants where the Federal share is in excess of \$100,000. In grants where the Federal share exceeds \$100,000, the budgeted line items can be changed, but if the cumulative changes exceed ten (10) percent of the total budget, FEMA must approve those changes

Article VII – Financial Reporting

The Standard Form 270, request for Advance or Reimbursement mentioned above, will also be used for interim financial reporting purposes. At the end of your performance period, or upon completion of the grant's scope of work, a final financial report is required to close out your grant. The FEMA Form 20-10, Financial Status Report, is due within 90 days after the end of the performance period. The 20-10 should be submitted to:

Federal Emergency Management Agency
Office of Financial Management
Grants and Acquisition Support Division, Room 350
500 C Street, SW
Washington, DC 20472

Copies of the FEMA Form 20-10 and the Standard Form 270 may be obtained from the FEMA website or by calling the toll free number of the USFA Grant Program Technical Assistance Center at 866-274-0960.

Article VIII – Performance Reports

You must submit a performance report to FEMA (along with the final financial report detailed in Article VII) within 90 days after the end of your performance period. The final performance report should provide a short narrative on what you accomplished with the grant funds and any benefits you derived there from.

Article IX – FEMA Officials

Brian Cowan, Director of the Office of Strategic Initiatives, is the program officer for this grant program. The program officer is responsible for the technical monitoring of the stages of work and technical performance of the activities described in the approved grant application.

Richard W. Goodman, Director of the Office of Grants and Acquisition Support, is the assistance officer for this grant program. The assistance officer is the Federal official responsible for negotiating, administering, and executing all grant business matters.

Article X – Other Terms and Conditions

- A. Pre-award costs directly applicable to the awarded grant are allowable if approved in writing by the FEMA program official.
- B. The grantee agrees to maintain their operating expenditures in the funded grant category at a level equal to or greater than the average of their operating expenditures in the two fiscal years preceding the fiscal year in which assistance is awarded.
- C. The grantee agrees to provide information to the national fire incident reporting system for the period covered by the grant.
- D. Availability of Funds. You can only charge the grant with costs resulting from obligations you made within the performance period. If you cannot obligate all of your grant funds within the performance period, you can request an extension if your request: 1) is in writing, 2) is submitted more than 30 days prior to the end of the performance period, and 3) explains why it was impossible for you to spend the grant funds within the original performance period. You must liquidate all grant obligations no later than 90 days after the end of the performance period.
- E. Excessive Funds. If you have completed your project prior to the end of the performance period, you can do one of three things. The first option is for you to expand the original scope of your grant and do more within the category that you received the award. You do not need FEMA's approval to expand the scope of work as long as the expansion is consistent with the original scope of work. The second option is for you to use excess funds to create or expand your fire prevention program. If you select this option, you must formulate your plan for the use of the excess funds and present that plan to FEMA in writing. FEMA will, in turn, inform you whether the change in your grant is approved. Finally, the third option is to return all the funds to FEMA or otherwise inform FEMA via your final performance report that excess funds are not necessary for you to fulfill your grant

obligations. If your grant performance period has expired and you have excess funds in your possession after completion of the project, you must return those funds to FEMA.

Article XI – General Provisions

The following are hereby incorporated into this agreement by reference:

44 CFR, Emergency Management and Assistance

Part 7 Nondiscrimination in Federally-Assisted Programs

Part 17 Government-wide Debarment and Suspension (Non-procurement) and
Government-wide Requirements for Drug-free Workplace (Grants)

Part 18 New Restrictions on Lobbying

31 CFR 205.6 Funding Techniques

OMB Circular A-122 Cost Principles for Non-Profit Organizations

OMB Circular A-110 Uniform Administrative Requirements for Grants and Agreements
With Institutions of Higher Education, Hospitals, and Other Non-
Profit Organizations

Assistance to Firefighters Grant Application and Assurances contained therein.

Article XII – Audit Requirements

All grantees must follow the audit requirements of OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. The main requirement of this OMB Circular is that grantees that expend \$300,000 or more in Federal funds (from all Federal sources) must have a single audit performed in accordance with the circular.

As a condition of receiving funding under this grant program, you must agree to maintain grant files and supporting documentation for three years after the conclusion of the grant. You must also agree to make your grant files, books, and records available for an audit by FEMA, the General Accounting Office (GAO), or their duly authorized representatives to assess the accomplishments of the grant program or to ensure compliance with any requirement of the grant program.